

EXHIBIT JJ

Message

From: Luddy, Jennifer L. (EHQ) [/O=EXPRESS-SCRIPTS/OU=STLOUIS/CN=RECIPIENTS/CN=LEONEJ]
Sent: 5/7/2018 1:03:15 AM
To: Kautzner, Adam W. (EHQ) [awkautzner@express-scripts.com]; Behm, Andrew (BLM) [andrew.behm@express-scripts.com]; Bitney, Clark B. (EHQ) [cbitney@express-scripts.com]
CC: Henry, Brian (EHQ) [bhenry@express-scripts.com]
Subject: FW: FYI: 60 Minutes expected to air story about Acthar Gel this Sunday
Attachments: Acthar 60 Minutes response.docx

Hi –

If you haven't heard, the 60 minutes piece ran this evening. Synopsis below, and our updated response is attached. Thanks, again, for your help with the initial draft a few months ago.

The lawyer for Rockford, Illinois suggested in the piece that we could have/should have found a way to do a \$1 alternative to Acthar, similar to what we did with Daraprim. Tim is asking us if that is possible. Clark – I recall you saying we explored this, but is it possible?

Tim also wondering if we are able to get Synacthen. The story says MKN owns it in the U.S., but that it's available in Canada for \$33. Appreciate the guidance here.

Thanks
 Jen

From: Henry, Brian (EHQ)
Sent: Sunday, May 6, 2018 8:30 PM
To: Akins, Martin (EHQ) <marty@express-scripts.com>; Anderson, Dave A. (EHQ) <DAnderson@express-scripts.com>; Anderson, Phyllis (EHQ) <Phyllis@express-scripts.com>; Arlotta, John (EVICORE) <jarlotta@evicore.com>; Barr, Roxanne (EHQ) <RBarr2@express-scripts.com>; Bier, Benjamin T. (EHQ) <BTBier@express-scripts.com>; Blando, Phil J. (WDC) <PJBlando@express-scripts.com>; Bricker, Amy J. (EHQ) <ABricker@express-scripts.com>; Dederichs, David M. (BLM) <DMDederichs@express-scripts.com>; Foote, Steve M. (EHQ) <SMFoote@express-scripts.com>; Gregory, Michael A. (EHQ) <Michael@express-scripts.com>; Havel, Jim M. (EHQ) <JHavel@express-scripts.com>; Houston, Christine A. (EHQ) <Christine.Houston@express-scripts.com>; Houts, Jonah (WDC) <JHouts@express-scripts.com>; Kates, Jamie G. (EHQ) <JGKates@express-scripts.com>; Luddy, Jennifer L. (EHQ) <Jennifer_Luddy@express-scripts.com>; Lynch, Julie (BLM) <julie.lynch@express-scripts.com>; McDonald, Maggie B. (EHQ) <maggie@express-scripts.com>; McKee, Georgia L. (EHQ) <GLMcKee@express-scripts.com>; Means, Pat L. (EHQ) <PLMeans@express-scripts.com>; Miller, Barb R. (EHQ) <BRMiller@express-scripts.com>; Miller, Grant P. (EHQ) <GPMiller@express-scripts.com>; Miller, Steven B. (EHQ) <SMiller@express-scripts.com>; Monshausen, Amy M. (EHQ) <AMonshausen@express-scripts.com>; Neville, Everett (EHQ) <everettneville@express-scripts.com>; Portell, Christine T. (EHQ) <CPortell@express-scripts.com>; Prouhet, Andrew J. (EHQ) <AProuhet@express-scripts.com>; Queller, David (EHQ) <dave@express-scripts.com>; Roberts, Pamela L. (EHQ) <Pam@express-scripts.com>; Sample, Neal J. (EHQ) <neal@express-scripts.com>; Seiz, Brian J. (EHQ) <BJSeiz@express-scripts.com>; Stettin, Glen (EHQ) <glen@express-scripts.com>; Thimangu, Rachel R. (EHQ) <RThimangu@express-scripts.com>; Varsam, Nick H. (EHQ) <NHVarsam@express-scripts.com>; Wade, Sara E. (EHQ) <SEWade@express-scripts.com>; Wentworth, Timothy (EHQ) <TWentworth1@express-scripts.com>; Zwilling, Vince J. (EHQ) <VJZwilling@express-scripts.com>; Varsam, Nick H. (EHQ) <NHVarsam@express-scripts.com>; Blaisdell, Robert J. (EHQ) <RJBlaisdell@express-scripts.com>; Guerrier, Ron (STL) <Ron@express-scripts.com>; Brncic, Julia G. (EHQ) <JGBrncic@express-scripts.com>; Baumann, Urmila P. (EHQ) <UPBaumann@express-scripts.com>; Stoll, Allison (EHQ) <ASToll@express-scripts.com>; Behm, Andrew (BLM) <Andrew.Behm@Express-Scripts.com>; Dohm, Jason G. (BLM) <JGDohm@express-scripts.com>; Kautzner, Adam W. (EHQ) <AWKautzner@express-scripts.com>
Subject: RE: FYI: 60 Minutes expected to air story about Acthar Gel this Sunday

Earlier this evening, the 60 Minutes story ran.

A link to the transcript is here:

<https://www.cbsnews.com/news/the-problem-with-prescription-drug-prices/>

Our response plan is attached. It includes a media holding statement, talking points for SAM, and a potential blog post if we need it.

We met earlier this evening as a team. Here is our take:

- Obviously, a negative story for both us and Mallinckrodt. The focus was, primarily, on Mallinckrodt for buying an old drug and jacking up the price.
- The first part of the segment did reference the function of PBMs – to lower costs and to manage pharmacy benefits.
- The negative elements for us are as follows...there are others, but the ones that come immediately to mind:
 - We are seen as guilty by association. Mallinckrodt increased the price. We're seen as not doing anything about it.
 - While it was noted that there was no competition available for Acthar, it was also suggested that we could have done something as we did with Daraprim, and didn't.
 - Peter Bach mentioned that there are a number of parts of Express Scripts that make money when prices are higher. That did not help.
 - The story included a section of our motion to dismiss the Rockford case which said that we "were not contractually obligated to control costs."
 - Rockford's former mayor accuses PBMs of being opaque, "raping the system," and that, in concert with pharma companies, "the fix is in."

Early social media returns are what you would expect. Most of the online criticism is from people who are either A. pro-single payer healthcare, B. do not know what Express Scripts is, or C. both. Also, those who criticize PBMs and Express Scripts (e.g. independent pharmacies) have tweeted their point of view.

We understand that are biggest focus needs to be on making sure account teams are prepared. We are working with SAM communications to get talking points out tonight. They are included as part of the attached document.

We anticipate that social media, and not traditional media, will be our biggest challenge for tomorrow.

As you know, we have engaged a broad team across the company to develop our response. We are working together to ensure all stakeholders – investors, policymakers, media, clients – get a consistent message. We had a call tonight with GA/IR/Comms and our crisis communications agency to review and update our plan. We believe we have what we need to combat this issue for now and will escalate our actions as needed.

If you have any questions, let me know.

From: Henry, Brian (EHQ)

Sent: Friday, May 4, 2018 4:24 PM

To: Akins, Martin (EHQ) <marty@express-scripts.com>; Anderson, Dave A. (EHQ) <DAnderson@express-scripts.com>; Anderson, Phyllis (EHQ) <Phyllis@express-scripts.com>; Arlotta, John (EVICORE) <jarlotta@evicore.com>; Barr, Roxanne (EHQ) <RBarr2@express-scripts.com>; Bier, Benjamin T. (EHQ) <BTBier@express-scripts.com>; Blando, Phil J. (WDC) <PJBlando@express-scripts.com>; Bricker, Amy J. (EHQ) <ABricker@express-scripts.com>; Dederichs, David M. (BLM) <DMDederichs@express-scripts.com>; Foote, Steve M. (EHQ) <SMFoote@express-scripts.com>; Gregory, Michael A. (EHQ) <Michael@express-scripts.com>; Havel, Jim M. (EHQ) <JHavel@express-scripts.com>; Houston, Christine A. (EHQ) <Christine.Houston@express-scripts.com>; Houts, Jonah (WDC) <JHouts@express-scripts.com>; Kates, Jamie G. (EHQ) <JGKates@express-scripts.com>; Luddy, Jennifer L. (EHQ) <Jennifer.Luddy@express-scripts.com>; Lynch, Julie (BLM)

<julie.lynch@express-scripts.com>; McDonald, Maggie B. (EHQ) <maggie@express-scripts.com>; McKee, Georgia L. (EHQ) <GLMcKee@express-scripts.com>; Means, Pat L. (EHQ) <PLMeans@express-scripts.com>; Miller, Barb R. (EHQ) <BRMiller@express-scripts.com>; Miller, Grant P. (EHQ) <GPMiller@express-scripts.com>; Miller, Steven B. (EHQ) <SMiller@express-scripts.com>; Monshausen, Amy M. (EHQ) <AMonshausen@express-scripts.com>; Neville, Everett (EHQ) <everettneville@express-scripts.com>; Portell, Christine T. (EHQ) <CPortell@express-scripts.com>; Prouhet, Andrew J. (EHQ) <AProuhet@express-scripts.com>; Queller, David (EHQ) <dave@express-scripts.com>; Roberts, Pamela L. (EHQ) <Pam@express-scripts.com>; Sample, Neal J. (EHQ) <neal@express-scripts.com>; Seiz, Brian J. (EHQ) <BJSeiz@express-scripts.com>; Stettin, Glen (EHQ) <glen@express-scripts.com>; Thimangu, Rachel R. (EHQ) <RThimangu@express-scripts.com>; Varsam, Nick H. (EHQ) <NHVarsam@express-scripts.com>; Wade, Sara E. (EHQ) <SEWade@express-scripts.com>; Wentworth, Timothy (EHQ) <TWentworth1@express-scripts.com>; Zwilling, Vince J. (EHQ) <VJZwilling@express-scripts.com>; Varsam, Nick H. (EHQ) <NHVarsam@express-scripts.com>; Blaisdell, Robert J. (EHQ) <RJBlaisdell@express-scripts.com>; Guerrier, Ron (STL) <Ron@express-scripts.com>; Brncic, Julia G. (EHQ) <JGBrncic@express-scripts.com>; Baumann, Urmila P. (EHQ) <UPBaumann@express-scripts.com>; Stoll, Allison (EHQ) <ASToll@express-scripts.com>; Behm, Andrew (BLM) <Andrew.Behm@Express-Scripts.com>; Dohm, Jason G. (BLM) <JGDohm@express-scripts.com>; Kautzner, Adam W. (EHQ) <AWKautzner@express-scripts.com>

Subject: RE: FYI: 60 Minutes expected to air story about Acthar Gel this Sunday

One quick update:

Mallinckrodt reached out and noted that they have put a website up (see below) and they will update the website as they determine necessary after the segment runs on Sunday.

www.mallinckrodt.com/acthar

Also, after discussing with the extended team and with our external counsel, we will monitor Sunday's episode and determine what additional response, if any, is required from us. We will keep you posted, but we will remain ready with our current materials.

=====

FYI -- This coming Sunday, we expect CBS News' *60 Minutes* program will air a story about the medication H.P. Acthar Gel -- its origins, therapeutic profile, manufacturing and price. As you know, Mallinckrodt has faced considerable criticism over the past several years for its pricing of Acthar Gel, and, by extension, we have also been the focus of media and investor questions about our role in the supply chain. We expect the piece will imply that Express Scripts has a questionable relationship with Acthar Gel's manufacturer, Mallinckrodt Pharmaceuticals, thus allowing the expensive medication to be used more often than necessary -- particularly in Medicare -- at a significant cost to taxpayers, patients and employers/insurers. The story will center on a lawsuit from the City of Rockford, Illinois, against Mallinckrodt, multiple Express Scripts entities and former Express Scripts subsidiary, UBC.

Pasted below is a link to a video on the 60 Minutes website -- a preview of the story, along with a written summary that appears on the website.

60 Minutes approached us earlier this year with a series of questions about Express Scripts' relationship with Mallinckrodt. Working with legal, supply chain, our Medicare team and other subject matter experts, we provided a written response to the questions with the goal being to ensure the facts were well represented and that we mitigated any references to Express Scripts or UBC. We shared our proposed response with members of senior staff prior to responding to 60 Minutes.

In anticipation of this story, we have prepared a response package (attached) that has been updated with feedback from legal and other internal stakeholders. We've also had outside communication counsel review and provide recommendations to ensure we deliver the right message. We are engaged with our external crisis communications counsel.

Among the elements in this package are:

- 1.) Priority S/AM communication with background and talking points for account teams.

- 2.) A rebuttal post for our Corporate Website, explaining how we help plan sponsors manage the use of this medication while ensuring patients who need it – namely babies suffering from infantile spasms – can get it.
- 3.) Statement and Q&A for use with reporters, investors and policymakers.

This communications package is flexible and will allow us to quickly implement other communications tactics, as needed, based on the content of the piece.

We are ready to respond as necessary. If you have any questions, let us know.

=====

<https://www.cbsnews.com/news/why-does-your-prescription-cost-so-much/>

Why does your prescription cost so much?

What one city did to fight high drug prices reveals a drug supply chain in which just about every link can benefit when prices go up; Sunday at 7 p.m. on CBS

Rockford, Illinois, had enough. What pushed it over the edge was the high cost of a prescription drug that in 2001 cost about \$40 a vial and today goes for more than \$40,000 a vial. The city decided to challenge the health care system that created the 100,000 percent price increase in that one drug. Lesley Stahl reports on one city's quest to take on an industry that it says is shrouded in secrecy and puts its bottom line ahead of the best interests of its sick customers. Stahl's report will be broadcast on 60 Minutes, Sunday, May 6 at 7:00 p.m. ET/PT on CBS

"As long as they can get away with the increase in price, they're going to do it. Until somebody pushes back."

Rockford, an old industrial city, still pays the health care costs for its 1,000 municipal workers and their dependents rather than using an insurance company. When it was faced with paying nearly half a million dollars for the 66-year-old drug used to treat infantile spasms in just two of its employees' children, the city's then-mayor, Larry Morrissey, wanted to know why. But his investigation hit a brick wall for two years. "It's absolute secrecy. There's an absolute opaque system of pricing for drugs in our country. That's part of the problem," Morrissey says.

Morrissey says because his city's drug bill was skyrocketing it was affecting his ability to fund basic services like fire and police. "Everybody's asking the question, 'Why is healthcare so expensive?' Because the fix is in... That's the short answer," he tells Stahl. Rockford is suing the drug's owner for price fixing, which the company denies.

The story of Rockford reveals how just about every player in the drug supply chain can make money when drug prices go up. For example, pharmacy benefit managers – firms that buy drugs for clients and promise them cheaper rates – can and do own businesses that earn money from packaging or delivering drugs. Under that scenario, Rockford's lawyer says, the company has a divided loyalty between its mission to keep drug prices low on one hand and to maximize profits on the other.

Dr. Peter Bach, of Memorial Sloane Kettering hospital in New York, studies the cost and value of drugs. "The underlying problem we have with prescription drugs in this country is that every single actor has the potential to make money when drug prices go up," he tells Stahl. "[Doctors] make more money when they give expensive drugs than less expensive drugs. It's true of hospitals, too. It's true of pharmacies as well. " Says Morrissey, "As long as they can get away with the increase in price, they're going to do it. Until somebody pushes back."